

ARN-4464

E032737 VIKRAM S. BAGADTHEY

 Date: DD / MM / YYYY

 To  
 Nippon India Mutual Fund

Dear Sir,

 I 1st Applicant, 2nd Applicant & 3rd Applicant

had opted for Trigger facility in the Folio No. \_\_\_\_\_ for Scheme \_\_\_\_\_

 for Purchase Date DD/MM/YYYY for Purchase Amount ₹ \_\_\_\_\_.

I / We wish to discontinue my Trigger facility in the above mentioned scheme for the given purchase date and amount. I / We request you to cancel / stop the Trigger facility registered with you from my / our above account with immediate effect.

Yours truly,

<b>SIGN HERE</b>	First / Sole Applicant / Guardian Authorised Signatory	Second Applicant Authorised Signatory	Third Applicant Authorised Signatory
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**INSTRUCTIONS**

- 1) The investors can use the Trigger cancellation form to discontinue Trigger registered in a given scheme for given purchase date and amount in a given folio / account with Nippon Life India Asset Management Limited (NAM India). Please use separate cancellation forms for different schemes purchase date and amount in the same folio or different folios.
- 2) The investors can discontinue Trigger facility by providing a written notice to the Designated Investor Service Center (DISC). The cancellation request will be processed within 7 working days from the date of receipt of the request.
- 3) Investor needs to ensure that the details mentioned in the Trigger Cancellation form are correctly filled in. In case of any ambiguity the Trigger Cancellation form is liable for rejection either at the collection point itself or subsequently after detailed scrutiny / verification at the back office of the Registrar.
- 4) In case of joint holders in the folio the form needs to be signed by either one of the holder or all the holders depending upon the mode of holding.

 Received from Mr./Mrs./Ms. 1st Applicant, 2nd Applicant & 3rd Applicant,

an application for cancellation of Trigger facility in Folio No. \_\_\_\_\_

 for Scheme \_\_\_\_\_ for Purchase Date DD/MM/YYYY

for Purchase Amount ₹ \_\_\_\_\_

 Signature, Date & Stamp  
 OF receiving office